



April 1, 2003

Mayor Wesely and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Wesely and Members of the City Council:

An investigation has been made regarding the application of Bag N Save, 4615 Vine Street requesting a class D liquor license.

Bag N Save currently has eleven locations in the State of Nebraska, all holding liquor licenses.

Helene Shargo, co-owner has requested that she be approved as the manager of this liquor license. Mrs. Shargo has been approved by the Liquor Control Commission on eight previous Bag N Save liquor licenses.

Background information on the applicants is as follows:

Helene Shargo was born in Omaha, Nebraska. She attended the University of Nebraska, Omaha graduating in 1965. Mrs. Shargo has been a co-owner of Bag N Save since 1981

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

A handwritten signature in black ink, appearing to read "Tom Casady", is positioned above the printed name.

THOMAS K. CASADY, Chief of Police



Police Department
575 South 10th Street / Lincoln, Nebraska 68508 / Phone: 402-441-7204 / Fax: 402-441-8492 / Web: www.ci.lincoln.ne.us
A nationally accredited law enforcement agency



Liquor License Business Report / Completed by Inv Fosler Date: 4-1-03

DBA: Bag N Save

ADDRESS 4615 Vine Street PHONE _____

TYPE OF INVESTIGATION:

PURCHASE _____ UPGRADE _____ EXPANSION _____ NEW

OWNER MANAGER OTHER _____

TYPE OF BUSINESS Grocery Store

CLASS: A B C D I J K CATERING OTHER _____

OWNERSHIP CORPORATION PARTNERSHIP INDIVIDUAL

PURCHASE PRICE _____ PROPERTY EQUIPMENT VALUE _____

AMOUNT FINANCED 0 SOURCE _____

COLLATERAL _____ COSIGNER(S) _____

LEASE AGREEMENT _____

EST INCOME %FOOD _____ %LIQUOR > 5%

COMMERCIAL INDUSTRIAL RESIDENTIAL

TRAFFIC moderate PARKING off street

READY FOR OPERATION: YES NO EST DATE Apr 2003

FOOD SERVICE _____ # OF EMPLOYEES FT 20 PT 60

DOES LICENSE COMPLY WITH LEGAL DISTANCES: YES
NO _____

EST SEATING _____ EST # DAILY CUSTOMERS unk

HOURS OF OPERATION 7am - 10pm mon-sun

HUMAN RIGHTS COMMISSION CHECKED- YES NO N/A

Liquor License Investigation

Business (DBA) Bag N Save

☒ Manager ☒ Owner Other _____

Name: Helene Shrago

US Citizen? ☒ Yes No

Has applicant ever been cited for liquor law violations? No ☒ Yes
Explain See Corp List

Does applicant have an interest in another liquor license? No ☒ Yes
Explain 11 other Bag N Save's

Is spouse qualified to hold a license? ☒ Yes No N/A

How is applicant if not an owner to be paid? Salary Hourly N/A

How many hours will applicant be at the establishment? 10+

Any other employment? No ☒ Yes, explain 11 other Bag N Save's

Any previous experience with a liquor license? ☒ Yes No

Any criminal convictions? ☒ No Yes

Comments _____

Is applicant a property owner in Lincoln? ☒ Yes No

Is applicant involved in any civil litigation? ☒ No Yes

Comments _____

☒ Photo ☒ Records Check ☒ References

Comments _____

Interview Date 4 / 1 / 03

STATE OF NEBRASKA



Mike Johanns
March 27, 2003

City Clerk
County/City Bldg
555 South 10th Street
Lincoln NE 68508

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Michelle Porter
Licensing Division

Enclosures

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

(21)

FORM 35-4001
REV. 12/99

NEBRASKA LIQUOR CONTROL COMMISSION
Forrest D. Chapman
Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 950-46
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814
TRS USER 800 833-7352 (TTY)
web address: <http://www.nol.org/home/NLCC/>

FILED
CITY OF LINCOLN
NEBRASKA
MAR 28 PM 2 03

A3-033082
35

Bag N SAVE
4615 Vine St 68503
Class D

Att date 0-0-01
PH: 4-11-03
4-21-03

@ 5:30 pm

APPLICATION FOR LICENSE

Nebraska Liquor Control Commission
PO Box 95046,
201 Centennial Mall South
Lincoln, NE 68509-5046

<http://www.nol.org/home/NLCC/>
Phone: (402) 471-2571
Fax: (402) 471-2814

Local mp

MAR 24 2003

New

COPY

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in triplicate 8. Required areas marked by a red asterisk (*)

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

| Class of License (Check applicable class) * | Registration Fee | License Fees | Corporate Surety Bond *send copy |
|---|---------------------|-----------------------------|--|
| <input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits | \$45.00 | Collected at Local Level | exempt |
| <input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits | \$45.00 | Collected at Local Level | exempt |
| <input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits | \$45.00 | Collected at Local Level | exempt |
| <input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits | \$45.00 | Collected at Local Level | exempt |
| <input type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits | \$45.00 | Collected at Local Level | exempt |
| <input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits | \$45.00 | \$150.00 | exempt |
| <input type="checkbox"/> D1 Spirits, Wine, Beer, Off Sale Only - within extraterritorial zoning jurisdiction | \$45.00 | \$150.00 | exempt |
| <input type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits | \$45.00 | Collected at Local Level | exempt |
| <input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, On Sale) | \$45.00 | Collected at Local Level | exempt |
| <input type="checkbox"/> H Nonprofit Corporation | \$45.00 | Collected at Local Level | exempt |
| <input type="checkbox"/> K Wine Only, Off Sale | \$45.00 | Collected at Local Level | exempt |
| <input type="checkbox"/> O Boat | \$45.00 | \$50.00 | exempt |
| <input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits | \$45.00 | Varies \$100 to \$1,000 | *\$10,000 min. |
| <input type="checkbox"/> X Wholesale Liquor | \$45.00 | \$500.00 | *\$ 5,000 min. |
| <input type="checkbox"/> W Wholesale Beer | \$45.00 | \$250.00 | *\$ 5,000 min. |
| <input type="checkbox"/> Y Farm Winery | \$45.00 | \$250.00 | *\$ 1,000 min. |
| <input type="checkbox"/> L Craft Brewery (Brew Pub) | \$45.00 | \$250.00 | *\$ 1,000 min. |

| TYPE OF APPLICATION * | NAME OF PERSON ASSISTING WITH APPLICATION | |
|---|--|--|
| Type of application being applied for (check appropriate box) | <div style="text-align: center; font-size: 2em; border: 1px solid black; padding: 5px;">COPY</div> | |
| 1. <input type="radio"/> Individual License requires Form 1 to be attached. | | Name Brent M. Kuhn |
| 2. <input type="radio"/> Partnership License requires Form 2 to be attached. | | Firm Name Harris, Feldman Law Offices |
| 3. <input checked="" type="radio"/> Corporate License requires Forms 3 and Manager Application to be attached | Address 10050 Regency Cir. Ste. 101, O Omaha, NE 68114 | |

| SECTION A -- LOCATION INFORMATION -- Must be completed by all applicants | | | |
|--|---|--|---------|
| Trade Name (name of business) | | Telephone Number at premise to be licensed | |
| Bag 'N Save, Inc. | | 402/592/7785 | |
| 1) Street Address of Proposed licensed premise | | 2) Mailing Address for receipt of Liquor Control Commission mailings | |
| 4615 Vine Street | | 10727 "M" Street | |
| City | County | City | County |
| Lincoln | Lancaster | Omaha | Douglas |
| Zip Code | Is this located inside the city limits? | Zip Code | |
| 68503 | <input checked="" type="radio"/> Yes <input type="radio"/> No | 68127 | |

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.

See Attached

Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement. Approximately 30' x 50' at the East end.

*Main floor approx 176' x 288' plus irregular shaped
Section approx 11,619 sq ft*

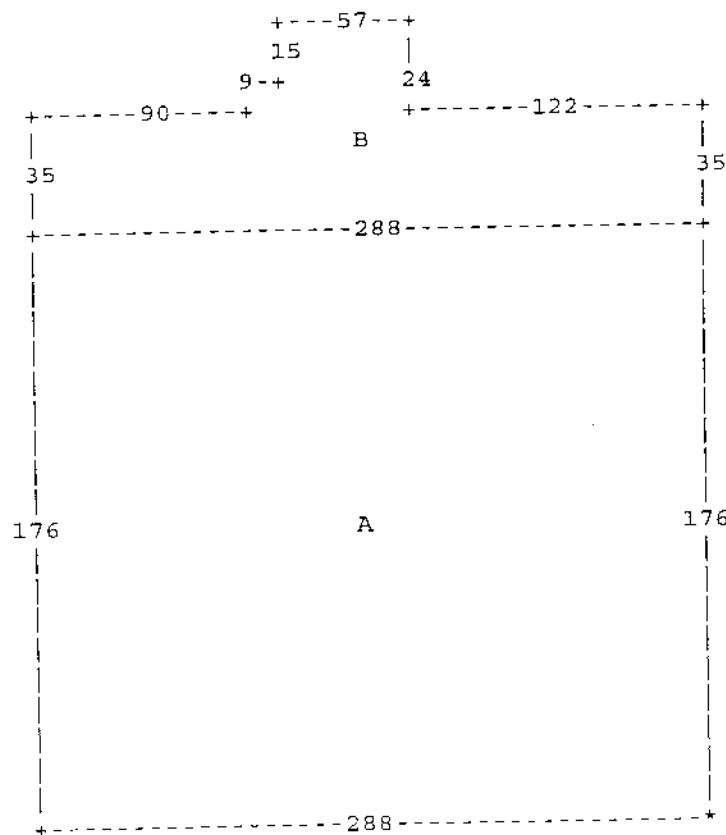
| Description | Stories | Wall HGT | GFA | Perimeter |
|---------------|---------|----------|--------|-----------|
| COM 1ST FLOOR | 1 | 20.00 | 50,688 | 928 |
| COM 1ST FLOOR | 1 | 20.00 | 11,619 | 694 |

Commercial Refinements:

| Description | Unit | Measr-1 | Measr-2 | Measr-3 |
|----------------|------|---------|---------|---------|
| SPRINKLER SYS | SF | 62,307 | 0 | 0 |
| CANOPY RF-GOOD | SF | 2,469 | 0 | 0 |
| OVERHEAD DR-WO | SF | 48 | 0 | 0 |

Building Sketch: 01

 B U I L D I N G S K E T C H



COM 1ST FLOOR Square Feet: 50688
 COM 1ST FLOOR Square Feet: 11619

| SECTION B | | OTHER INFORMATION REQUIRED | | * |
|---|---|--|--|---|
| | Yes | No | Explanation/Comments Note: Only what is visible on screen will be printed | |
| <p>* 1. READ CAREFULLY. Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. Include any DWIs or DUIs. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.</p> | Yes <input type="radio"/> | No <input checked="" type="radio"/> | | |
| <p>* 2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).</p> | Yes <input checked="" type="radio"/> | No <input type="radio"/> | Purchased Real Estate Only by LLC. | |
| <p>* 3. Are you filing a temporary agency agreement, Commission form 2031, whereby current licensee allows you to operate on their license? If yes, attach copy.</p> | Yes <input type="radio"/> | No <input checked="" type="radio"/> | | |
| <p>* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p> | Yes <input type="radio"/> | No <input checked="" type="radio"/> | | |
| <p>* 5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p> | Yes <input type="radio"/> | No <input checked="" type="radio"/> | | |

| | | | |
|---|--|--|---|
| <p>* 6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.</p> | <p>Yes <input checked="" type="radio"/></p> | <p>No <input type="radio"/></p> | <p>Furniture and fixtures shall be owned by SFI Lincoln Properties, LLC</p> |
| <p>* 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?</p> | <p>Yes <input type="radio"/></p> | <p>No <input checked="" type="radio"/></p> | |
| <p>* 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.</p> | <p>Yes <input type="radio"/></p> | <p>No <input checked="" type="radio"/></p> | |
| <p>* 9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.</p> | <p>Yes <input type="radio"/></p> | <p>No <input checked="" type="radio"/></p> | |
| <p>10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.</p> | <p>First National Bank - First National Bank of Fremont Jack, Helene, Leon, Dunita per phone Brent 3-25-03</p> | | |
| <p>* 11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.</p> | <p>See Attached Sheet</p> | | |
| <p>12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.</p> | <p>Helene Rae Shrago, approximately 10 hours per week.</p> | | |

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

Sign
here Jack Shrager
Jack Shrager

Sign
Here Leon Alvin Shrager
Leon Alvin Shrager

Sign
Here Helene Rae Shrager
Helene Rae Shrager

Sign
Here Danita Cheryl Shrager
Danita Cheryl Shrager

Sign
Here

Sign
Here

Sign
Here

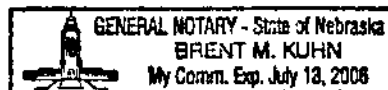
Sign
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RECEIVED

MAR 11 2003

NEBRASKA LIQUOR
CONTROL COMMISSION

Subscribed in my presence and sworn to before me this 13th day of March, 2003.



(SEAL)

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternative format.

Sign
here

Notary Public Signature

Verify & Print form

FORM 35-4010

REV 1 01

| 13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products. | She is the wife of a co-owner of the business which has been in existence for more than thirty years (including family owned predecessors) | | |
|--|--|--------------|----------------------------|
| 14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed) | See Deed and Lease attached | | |
| 15. When do you intend to open for business? | April <u>30</u> , 2003. | | |
| 16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet. | | | |
| NAME | FROM (YEAR) | TO (YEAR) | RESIDENCE (CITY, STATE) |
| See Attached Sheet | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

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Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

Sign
Here Jack Shrager
Jack Shrager

Sign
Here Leon Alvin Shrager
Leon Alvin Shrager

Sign
Here Helene Rae Shrager
Helene Rae Shrager

Sign
Here Danita Cheryl Shrager
Danita Cheryl Shrager

Sign
Here

Sign
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Sign
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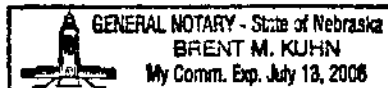
Sign
Here

RECEIVED

MAR 24 2003

NEBRASKA LIQUOR
CONTROL COMMISSION

Subscribed in my presence and sworn to before me this 13th day of March, 2003.



(SEAL)

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Sign
here

Notary Public Signature

Verify & Print form

FORM 35-4010

REV 1 01

Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

RECEIVED

NOV 21 2003

NEBRASKA LIQUOR CONTROL COMMISSION

INSTRUCTIONS:

- 1) Application and application for manager must be typewritten and submitted in triplicate
 - 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 25% of the stock, b) chief executive officer, c) proposed manager and d) all spouses
 - 3) Information regarding spouses must be completed
- Required areas marked by a red asterisk (*)

Name of Corporation That Will Hold License. **Attach copy of Articles of Incorporation**

Total Number of Shares (if corporation)

Bag 'N Save, Inc. *

10,000 *

Corporate Street Address

Mailing address for receipt of Liquor Control Commission Mailings

10727 "M" Street *

10727 "M" Street *

Corporate Telephone Number

City

County

State

Zip Code

4025927785 *

Omaha *

Douglas *

NE *

68127 * -

Name of Registered Agent

Name of Proposed Manager

Brent M. Kuhn *

Helene R. Shrago *

IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER

Name

Title

Date of Birth

Jack Shrago *

President *

*

Social Security Number

Home Address (1)

City

*

12639 Shirley Street *

Omaha *

State

Zip Code

Home Telephone Number

NE *

68144 * -

4023304877 *

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES

| Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases | Social Security Number | Date of Birth | Title |
|---|------------------------|---------------|---------------------|
| Shrago, Jack | | | President |
| Spouse Name | | | |
| Shrago, Helene Rae | | | Secretary/Treasurer |
| Partner Number of Shares / % | | | |
| 5,000 | | | |
| Spouse Number of Shares / % | | | |
| | | | |
| Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases | Social Security Number | Date of Birth | Title |
| Shrago, Leon Alvin | | | Vice President |

| | | | |
|------------------------------------|--|-----------------------------|-----------------------|
| Spouse Name | | | |
| Shrago, Danita Cheryl | | | Asst. Sec./Asst. Trea |
| Partner Number of Shares / % 5,000 | | Spouse Number of Shares / % | |

| Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases | Social Security Number | Date of Birth | Title |
|---|-----------------------------|---------------|---------------------|
| Name | | | |
| Shrago, Jack | | | President |
| Spouse Name | | | |
| Shrago, Helene Rae | | | Secretary/Treasurer |
| Partner Number of Shares / % | Spouse Number of Shares / % | | |

| Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases | Social Security Number | Date of Birth | Title |
|---|-----------------------------|---------------|------------------------|
| Name | | | |
| Shrago, Leon | | | Vice President |
| Spouse Name | | | |
| Shrago, Danita Cheryl | | | Asst. Sec./Asst. Treas |
| Partner Number of Shares / % | Spouse Number of Shares / % | | |

| Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases | Social Security Number | Date of Birth | Title |
|---|-----------------------------|---------------|-------|
| Name | | | |
| | | | |
| Spouse Name | | | |
| | | | |
| Partner Number of Shares / % | Spouse Number of Shares / % | | |

(If Necessary, Continue on Separate Sheet)

Is this Corporation LLC controlled by another Corporation?

Yes ☐ No ☒

Name of control Corporation

IF YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock interest in that corporation LLC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations

owning more than 25% stock and listing of the percentage of stock owned.

Please indicate below your corporate tax year with the IRS

Starting date: 01/01 Ending date: 12/31

State of Nebraska

)

)

ss.

)

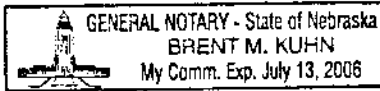
Douglas County

COPY
RECEIVED

MAR 14 2003

BRASSerie
CONTROL COMMISSION


Notary Public Signature & Seal



By Joan Smith
President/Member

Helen Shrage
Secretary/Member

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

Verify Form and Print

FORM 35-4183
REV. 02/01

CONFIRMED RECEIVED

Application for Corporate Manager

MAR 14 2008

Must Be A Nebraska Resident**Please submit in Triplicate**NEBRASKA LIQUOR
CONTROL COMMISSION

Return to: Nebraska Liquor Control Commission, PO Box 95046
301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571

Fax: (402) 471-2814

Web address: <http://www.nol.org/home/NLCC/>

Required areas marked by a red asterisk (*)

LIQUOR LICENSE INFORMATION

Name of Licensed Corporation

Bag 'N Save, Inc. *

Class & License number

Class D - Current App. *

Trade Name of Licensed Premise

Bag 'N Save *

Street Address of Licensed Premise

4615 Vine Street *

City

Lincoln *

County

Lancaster *

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO:



APPLICANT INFORMATION (MUST BE 21 OR OVER)

Full Name (Last, First, Middle, Maiden)

Shrago, Helene Rae Franklin *

Sex *

| | |
|----------------------------------|-----------------------|
| F | M |
| <input checked="" type="radio"/> | <input type="radio"/> |

Social Security Number

*
.....

Date of Birth

*
.....

Place of Birth

Omaha, NE *

Home Street Address

12639 Shirley *

City

Omaha *

County

Douglas *

State

NE *

Zip Code

68144 *

Home Telephone Number

402/330-4877 *

Business Telephone Number

402/592-7785 *

Drivers License Number

*
.....

State

NE *

Are You Married? * Yes ☒ No ☐ If Yes, You must complete the following:

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

Full Name (Last, First, Middle, Maiden)

Shrago, Jack

Social Security Number

Drivers License Number

State

NE

Date of Birth

Place of Birth

Omaha, NE

* 1. **READ CAREFULLY.** Answer completely and accurately.

Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

Yes No

☐ ☒

* 2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

Yes No

☒ ☐

See Att.

* 3. Have you or your spouse ever made a compromise settlement for violation of such laws?

Yes No

☒ ☐

* 4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License? Nebraska Liquor Control Act (§53-131.01)

Yes No

☒ ☐

* 5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

Yes No

☒ ☐

RESIDENCES SINCE AGE 18, APPLICANT AND SPOUSE MUST COMPLETEYear
From To

Applicant: City & State

See Attached Sheet

Spouse: City & State

See Attached Sheet

Year
From To

Applicant: City & State

Spouse: City & State

Year
From To

Applicant: City & State

Spouse: City & State

Year
From To

Applicant: City & State

Spouse: City & State

EMPLOYERS - LIST LAST TWO EMPLOYERSYear
From To

Name of Employer

See Attached Sheet

Name of Supervisor

Telephone Number

Year
From To

Name of Employer

Name of Supervisor

Telephone Number

**PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY APPLICANT
& SPOUSE**

STATE OF NEBRASKA)

) SS

COUNTY OF DOUGLAS)

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit may be attached, however, fingerprint cards are still required to be filed.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.

Helene Shrago
Signature of Applicant

Jack Shrago
Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this
13th day of March, 2003.

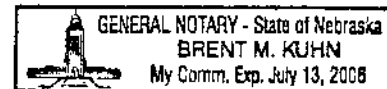
Subscribed in my presence and sworn to before me this 13th
day of March 2003

Brent M. Kuhn
Notary Signature & Seal

Brent M. Kuhn
Notary Signature & Seal



Verify and Print



FORM 35-4013
REV. 2/01

ATTACHMENT

APPLICATION FOR CORPORATE MANAGER OF BAG 'N SAVE, INC.

4615 Vine Street
Lincoln, NE

RECEIVED

MAR 24 2005

QUESTIONS - CONTINUED

NEBRASKA
CONTROL COMMISSION

| | | | |
|----|---------------------------|--------------|------------|
| 2. | 10727 "M" | Lic. #13456 | Date, 1981 |
| | Vinton Street | Lic. #09773 | Date, 1982 |
| | Harrison Street | Lic. #13660 | Date, 1986 |
| | 7600 Dodge | Lic. #15872 | Date, 1988 |
| | 10727 "M" | Lic. #17081 | Date, 1989 |
| | Grand Island | Lic. #D22599 | Date, 1992 |
| | 156 th & Weir | Lic. #57628 | Date, 2002 |
| | 114 th & Dodge | Lic. #57629 | Date, 2002 |

Residences Since Age 18, Applicant and Spouse:

| <u>NAME</u> | <u>FROM</u> | <u>TO</u> | <u>RESIDENCE</u> |
|---------------|-------------|-----------|--------------------------------------|
| Helene Shrago | 1960 | 1967 | 308 S. 52 nd , Omaha, NE |
| | 1967 | 1969 | 1616 Military, Omaha, NE |
| | 1969 | 1970 | 5635 Parker, Omaha, NE |
| | 1970 | 1976 | 1814 N. 56 th , Omaha, NE |
| | 1976 | 2003 | 12639 Shirley, Omaha, NE |
| Jack Shrago | 1953 | 1956 | 127 N. 33 rd , Omaha, NE |
| | 1956 | 1967 | 1309 N. 57 th , Omaha, NE |
| | 1967 | 1967 | 1616 Military, Omaha, NE |
| | 1969 | 1970 | 5635 Parker, Omaha, NE |
| | 1970 | 1976 | 1814 N. 56 th , Omaha, NE |
| | 1976 | 2003 | 12639 Shirley, Omaha, NE |

Applicant is the wife of co-owner of the business which has been in existence for more than thirty years (including family owned predecessors)

Bag 'N Save, Inc. Jack Shrago 402-592-7785

Leon Shrago

1965
1971
1974
1985

1971
1974
1985
1997

1309 N. 57th, Omaha, NE
7311 Parker, Omaha, NE
829 S. 123rd, Omaha, NE
2611 S. 167th Avenue Circle,
Omaha, NE

Darita Shrago

1969
1971
1974
1985

1971
1974
1985
1997

5653 Seward, Omaha, NE
7311 Parker, Omaha, NE
829 S. 123rd, Omaha, NE
2611 S. 167th Avenue Circle,
Omaha, NE

F:\MyFiles\VPW\IN\BMR\HIS\OBarr\Save2 all.wpd

MEMBER-SKAL LODGE 8
CONTROL COMMISSION

APR 24 2003

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COPY

Bag 'N Save, Inc.
10727 "M" Street
Omaha, Nebraska 68127

507-4
RECEIVED
OCT 14 2002

October 13, 2002

NEBRASKA LIQUOR CONTROL
COMMISSION

Nebraska Liquor Control Commission
301 Centennial Mall South
Lincoln, Nebraska 68509-5046

**RE: BAG 'N SAVE INC.
770 NORTH 114TH STREET, OMAHA, NEBRASKA
15370 WEIR STREET, OMAHA, NEBRASKA**

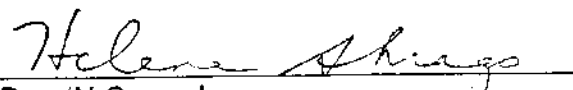
Dear Sir or Madam:

This correspondence is to advise you that there has been no change in the residence of Helene Shrago or Jack Shrago from 1997 to the present. Jack Shrago and I still reside at 12639 Shirley in Omaha, Nebraska.

This correspondence is to advise you that Leon Shrago and Danita Shrago lived at 2611 South 167th Avenue Circle in Omaha, Nebraska until May, 1997, at which time they moved to 805 South 120th Avenue, Omaha, Nebraska 68154 and they lived at that location until August, 2002. Since August, 2002 and to the present time, they currently reside at 12209 Leavenworth Road, Omaha, Nebraska 68154.

This letter is to serve as a supplement to our attachment for the liquor license for the Bag 'N Save locations referenced hereinabove.

Sincerely Yours,


Bag 'N Save, Inc.
By: Helene Shrago

No change since October 13, 2003.

BMK KW
P:\Brent\BMK\Kellis\Correspondence\Bag 'N Save\NLLC.addresses.wpd

COPY

BAG 'N SAVE, INC. LIQUOR LICENSE VIOLATIONS

1. September 13, 1996
1826 Vinton Street, Omaha, NE
Sale of Liquor to Minor
Paid Fine
2. August 8, 1997
10727 M Street, Omaha, NE
Sale of Liquor to Minor
Paid Fine
3. September 13, 1998
5101 Harrison Street, Bellevue NE
Sale of Liquor to Minor
Paid Fine
4. Dec. 12, 1998
10727 M Street, Omaha, NE
Sale of Liquor to Minor
Paid Fine
5. March 9, 2001
5101 Harrison St., Bellevue, NE
Sale of Liquor to Minor
Paid Fine
6. September 26, 2002
1826 Vinton Street, Omaha, NE
Sale of Liquor to Minor
Paid Fine

RECEIVED

MAR 24 2003

NEBRASKA LIQUOR
CONTROL BOARD

We believe these to be all of the violations dating back to 1996, but others may have been inadvertently left off this list due to missing records.

BAG 'N SAVE LIQUOR POLICY

Bag 'N Save has implemented and currently maintains the following policies to prevent the sale of liquor to minors:

1. All store employees are advised on their hire date that failure to follow company policies and procedures with respect to the sale of liquor shall result in their immediate termination with no exceptions.
2. All employees are required to read and sign the company policies and procedures that must be followed concerning liquor sales, a copy of which is maintained in the employee's file.
3. When a liquor product passes through the scanner, the cash register automatically locks the completion of the sale until the cashier makes the proper identification. This requires the cashier to request personal identification from all persons who appear to be thirty five (35) years of age or younger, and the cashiers are told that "when in doubt" ask for identification. After the identification has been made and the sale has been determined to be in accordance with the law, the cashier hits a special key which unlocks the register and completes the liquor sale.
4. Bag 'N Save provides extensive training to its employees on liquor sales, and also provides regular updates and internal reviews of liquor sales, which includes the information to cashiers of the birth date cutoff for persons under 21 years of age.